| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | | | 4/13/00 |
| O.I.P.E. CLASSIFIER | | 10 | 4/19-00 |
| FORMALITY REVIEW | | | 6/10/00 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | ...................... Rejected | | N | ...................... | Non-elected |
| = | ...................... Allowed | | I | ...................... | Interference |
| — | (Through numeral)... Canceled | | A | ...................... | Appeal |
| ÷ | ...................... Restricted | | O | ...................... | Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

Best Available Copy